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SIGNATURE C	OF APPLICANT, ATTO	RNEY, OF	RAGENT	
Signature Steptoe & Johnson LLP Signature Printed name Scott D. Watkins				
Date 2/21/07		Reg. No.	36,715	
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Under the Paperwork Reduction Act 29 995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Effective of 2/08/2004.
Appropriations Act, 2005 (H.R. 4818). 2/08/2004. Complete if Known **Application Number** 10/699,356 TRANSMITTAI Filing Date October 31, 2003 For FY 2007 First Named Inventor Robert B. Thompson Jr. **Examiner Name** Mark A. Radtke Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2165 TOTAL AMOUNT OF PAYMENT (\$) 1520.00 12492.0148 Attorney Docket No METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 19-4293 Deposit Account Name: Steptoe & Johnson LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES **EXAMINATION FEES** Small Entity **Small Entity** Small Entity Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 300 Utility 500 200 150 250 100 Design 200 100 100 130 65 50 200 Plant 160 100 300 150 80 300 Reissue 150 500 250 600 300 Provisional 200 100 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 360 180 Multiple dependent claims **Multiple Dependent Claims Total Claims** Fee Paid (\$) **Extra Claims** 31HP _ - 20 or HP = Fee (\$) Fee Paid (\$) 0 HP = highest number of total claims paid for, if greater than 20. Fee Paid (\$) Indep. Claims **Extra Claims** Fee (\$) - 3 or HP = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof **Total Sheets Extra Sheets** Fee (\$) Fee Paid (\$) (round up to a whole number) 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Notice of Appeal; Petition for Extension of Time 1520.00

SUBMITTED BY Registration No. 36,715 Telephone (202) 429-3000 Signature Name (Print/Type) Scott D. Watkins

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